SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature Agent Addressed B. Received by (Printed Name) C. Date of Delivery 31 Company C. Date of Delivery 31 Company D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below: ☐ No
STEPHAN DELONG 190 E. 300 N.	
IVINS, UTAH 84738	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7005 25	70 0000 4801 8021
PS Form 3811, August 2001 Domestic Ref	turn Receipt 102595-02-M-154





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• Sender: Please print your name, address, and ZIP+4 in this box • LETTER DATED 12/14/2007
REASSASSMENT FOR CESSATION ORDER MC2007-28-01
S053032 SUNSE MINE (RAINBOW FND

RECEIVED
JAN 0 4 2008

VICKIE SOUTHWICK
DIV. OF OIL, GAS & MINING
DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUTIE 1210
SALT LAKE CITY UTAH 84114



